

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number - U - <u>6654</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / 2004 Through: <u>12</u> / <u>31</u> / 2004
3. Name and address of person filing. Name <u>David</u> <u>Acuna</u> P.O. Box, Bldg., Room No., if any Street <u>621 Heber Avenue</u> City <u>Calexico</u> State <u>California</u> ZIP Code +4 <u>92231</u>	4. Name, file number, and address of labor organization. Name <u>Teamsters Local 542</u> Labor Organization File Number <u>038-722</u> P.O. Box, Building and Room Number, if any Street <u>4666 Mission Gorge Place</u> City <u>San Diego</u> State <u>California</u> ZIP Code +4 <u>92120</u>
5. Position in labor organization. <u>Business Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code +4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>David Acuna</u>	On <u>08/10/05</u> Date	<u>619-582-0542</u> Telephone Number

Name of Person Filing David Acuna	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name O'Mara &amp; Padilla</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any Suite 200</p> <p>Street 12770 High Bluff Drive</p> <p>City San Diego</p> <p>State California ZIP Code + 4 92130</p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name Group Legal Consultants</p> <p>Trade Name, if any: JC 42 Legal Benefit Plan</p> <p>P.O. Box, Bldg., Room No., if any P.O. Box 3417</p> <p>Street</p> <p>City Burbank</p> <p>State California ZIP Code + 4 91508-3417</p>	<p>11.a. Nature of such dealing.</p> <p>Soliciting legal business</p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p>Baseball game 9/03/04</p> <p>12.b. Amount. \$165</p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p>

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<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="O'Mara &amp; Padilla"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text" value="Suite 200"/></p> <p>Street <input type="text" value="12770 High Bluff Drive"/></p> <p>City <input type="text" value="San Diego"/></p> <p>State <input type="text" value="California"/> ZIP Code + 4 <input type="text" value="92130"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="Group Legal Consultants"/></p> <p>Trade Name, if any: <input type="text" value="JC 42 Legal Benefit Plan"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text" value="P.O. Box 3417"/></p> <p>Street <input type="text"/></p> <p>City <input type="text" value="Burbank"/></p> <p>State <input type="text" value="California"/> ZIP Code + 4 <input type="text" value="91508-3417"/></p>	<p>11.a. Nature of such dealing.</p> <p><input type="text" value="Soliciting legal business"/></p> <p>11.b. Approximate dollar value of such dealing. <input type="text"/></p> <p>12.a. Nature of interest held or income received.</p> <p><input type="text" value="Football game 10/31/04"/></p> <p>12.b. Amount. <input type="text" value="\$220"/></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>14.a. Nature of payment.</p> <p><input type="text"/></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <input type="text"/></p>

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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="Hiden, Rott &amp; Oertle Law Offices"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text" value="Suite 306"/></p> <p>Street <input type="text" value="2635 Camino Del Rio South"/></p> <p>City <input type="text" value="San Diego"/></p> <p>State <input type="text" value="California"/> ZIP Code + 4 <input type="text" value="92108"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="Western Conference of Teamsters Legal Trust"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="642 Harrison Street"/></p> <p>City <input type="text" value="San Francisco"/></p> <p>State <input type="text" value="California"/> ZIP Code + 4 <input type="text" value="94107"/></p>	<p>11.a. Nature of such dealing.</p> <p><input type="text" value="Soliciting legal business"/></p> <p>11.b. Approximate dollar value of such dealing. <input type="text"/></p> <p>12.a. Nature of interest held or income received.</p> <p><input type="text" value="Gift of Liquor 12/04"/></p> <p>12.b. Amount. <input type="text" value="\$159"/></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>14.a. Nature of payment.</p> <p><input type="text"/></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <input type="text"/></p>